

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO.
09/973278
APPLICANT(S)
FILING DATE

9/25/04

CLAIMS

AS FILED	AFTER		AFTER		AFTER	
	1st AMENDMENT	IND.	DEP.	2nd AMENDMENT	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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100						
TOTAL IND.	4					
TOTAL DEP.	6					
TOTAL CLAIMS	10					